



General Assembly

***Amendment***

*January Session, 2005*

LCO No. **8120**

**\*SB0103408120HDO\***

Offered by:

REP. O'CONNOR, 35<sup>th</sup> Dist.

SEN. CRISCO, 17<sup>th</sup> Dist.

REP. MCCLUSKEY, 20<sup>th</sup> Dist.

To: Subst. Senate Bill No. **1034**

File No. 236

Cal. No. 598

***"AN ACT ESTABLISHING THE NUTMEG HEALTH PARTNERSHIP  
INSURANCE PLAN."***

1 Strike everything after the enacting clause and substitute the  
2 following in lieu thereof:

3 "Section 1. (NEW) (*Effective July 1, 2005*) (a) As used in this section:

4 (1) "Commissioner" means the Insurance Commissioner;

5 (2) "Group health insurance policy" means a group health insurance  
6 policy providing coverage of the type specified in subdivision (1), (2),  
7 (4), (11) or (12) of section 38a-469 of the general statutes;

8 (3) "Ineligible population" means (A) part-time employees, seasonal  
9 employees and independent contractors who are not eligible to  
10 participate in a group health insurance policy offered by an employer  
11 or in any other group health insurance policy, and (B) retired  
12 employees under the age of sixty-five who are not eligible to

13 participate in a group health insurance policy offered by a former  
14 employer or in any other group health insurance policy.

15 (b) Notwithstanding the provisions of chapter 700c of the general  
16 statutes, the Insurance Commissioner may approve any group health  
17 insurance policy or certificate which does not contain all the minimum  
18 coverages or benefits set forth in chapter 700c of the general statutes,  
19 provided such policy or certificate is approved only for issue to the  
20 ineligible population in this state.

21 Sec. 2. (*Effective from passage*) (a) Not later than December 1, 2006,  
22 each insurer, health care center or other entity that issues a policy  
23 approved pursuant to section 1 of this act shall submit the following  
24 information to the Insurance Commissioner on such form and in such  
25 manner as the commissioner prescribes: (1) The ages of individuals  
26 covered under the policies; (2) the number of individuals covered  
27 under the policies; (3) the types of policies issued; (4) the geographic  
28 areas in the state where insureds reside or such policies were issued;  
29 (5) to the extent known by the insurer, health care center or other  
30 entity, whether or not the individuals insured under such policies had  
31 health insurance coverage prior to obtaining the policy; and (6) any  
32 other relevant information that the insurer, health care center or other  
33 entity chooses to provide. In no event shall information provided  
34 under this subsection include individually identifiable information.  
35 Any individually identifiable information that is disclosed to the  
36 commissioner shall be confidential.

37 (b) Not later than January 1, 2007, the Insurance Commissioner shall  
38 submit a report to the joint standing committee of the General  
39 Assembly having cognizance of matters relating to insurance that  
40 includes (1) a statement on whether the commissioner has approved  
41 policies pursuant to section 1 of this act, and (2) if such policies were  
42 approved, the information received by the commissioner pursuant to  
43 subsection (a) of this section. The commissioner shall submit the report  
44 in accordance with section 11-4a of the general statutes.

45       Sec. 3. (NEW) (*Effective October 1, 2005*) (a) Not later than January 1,  
46       2006, the Insurance Commissioner, in consultation with the  
47       Commissioner of Social Services and the Healthcare Advocate, shall  
48       develop a comprehensive public education outreach program to  
49       educate health insurance consumers about the availability and general  
50       eligibility requirements of various health insurance options in this  
51       state. The program shall maximize public information concerning  
52       health insurance options in this state and shall provide for the  
53       dissemination of such information on the Insurance Department's  
54       Internet web site.

55       (b) The information on the department's Internet web site shall  
56       reference the availability and general eligibility requirements of (1)  
57       programs administered by the Department of Social Services,  
58       including, but not limited to, the Medicaid program, the HUSKY Plan,  
59       Part A and Part B, and the state-administered general assistance  
60       program, (2) health insurance coverage provided by the Comptroller  
61       under subsection (i) of section 5-259 of the general statutes, (3) health  
62       insurance coverage available under comprehensive health care plans  
63       issued pursuant to part IV of chapter 700c of the general statutes, and  
64       (4) other health insurance coverage offered through local, state or  
65       federal agencies or through entities licensed in this state. The  
66       commissioner shall update the information on the web site at least  
67       quarterly.

68       Sec. 4. (*Effective from passage*) Not later than February 1, 2006, the  
69       Comptroller shall submit a report to the joint standing committee of  
70       the General Assembly having cognizance of matters relating to  
71       insurance concerning the feasibility of providing coverage to  
72       uninsured residents of this state under the coverage offered pursuant  
73       to subsection (i) of section 5-259 of the general statutes. Such uninsured  
74       residents include, at a minimum, residents with no access to employer  
75       or government-sponsored health insurance. The Comptroller shall  
76       submit the report in accordance with section 11-4a of the general  
77       statutes."

This act shall take effect as follows and shall amend the following sections:		
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Section 1	<i>July 1, 2005</i>	New section
Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>October 1, 2005</i>	New section
Sec. 4	<i>from passage</i>	New section